

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION            | INITIALS | ID NO. | DATE    |
|---------------------|----------|--------|---------|
| FEE DETERMINATION   | mm       | 67814  | 9/7/55  |
| O.I.P.E. CLASSIFIER | MJN      | 50     | 9-8-99  |
| FORMALITY REVIEW    | 59573    |        | 9-13-99 |

59573

11-30-99

INDEX OF CLAIMS

✓ ..... Rejected ✓ N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 - (Through numeral)... Canceled A ..... Appeal  
 + ..... Restricted O ..... Objected

| Claim | Final | Original | Date   |
|-------|-------|----------|--------|
| 1     | ✓     | ✓        | 9-2-00 |
| 2     | ✓     | ✓        | 9-2-00 |
| 3     | ✓     | ✓        | 9-2-00 |
| 4     | ✓     | ✓        | 9-2-00 |
| 5     | ✓     | ✓        | 9-2-00 |
| 6     | ✓     | ✓        | 9-2-00 |
| 7     | ✓     | ✓        | 9-2-00 |
| 8     | ✓     | ✓        | 9-2-00 |
| 9     | ✓     | ✓        | 9-2-00 |
| 10    | ✓     | ✓        | 9-2-00 |
| 11    | ✓     | ✓        | 9-2-00 |
| 12    | ✓     | ✓        | 9-2-00 |
| 13    | ✓     | ✓        | 9-2-00 |
| 14    | ✓     | ✓        | 9-2-00 |
| 15    | ✓     | ✓        | 9-2-00 |
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If more than 150 claims or 10 actions  
 staple additional sheet here

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